POLITICAL COMMITTEE STATE OF ARIZONA CAMPAIGN FINANCE REPORT

For Office Use Only

CITY OF TUCSON

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1.	Green Party	o.C	Pina	Count	<u></u>	
	Full Name of Committee	\)	
	PO Box	600 1	4			
	Address TXSON A	-2	85703	520	798 61	69
	City	Zip	Code	Phone Numb	er	7

Sponsoring Organization and Office 3A OFFICE OF THE CITY CLERK Name of Candidate and Office Sought (if applicable) 90-094-CT Sonoran Seal Oyahoo.com 4. REPORTING PERIOD (Please check appropriate box) FILING DEADLINE ☐ January 31 Report — For Period of June 30 Report - For Period of January 1, 2007 through May 31, 2007*July 2, 2007 ☐ Pre-Primary Election Report — For Period of

☐ Post-Primary Election Report — For Period of ☐ Pre-General Election Report — For Period of

☐ Post-General Election Report — For Period of

☐ January 31, 2009 Report — For Period of

November 27, 2007 through December 31, 2008*February 2, 2009

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		1151.49
5b Cash on Hand at Beginning of this Reporting Period	1151.49	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	1512.75	1512.75
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	2664.24	2664.24
6a Total Debts and Obligations from Previous Campaign Committee at beginning of the Election Period (or at time Statement of Organization was filed for the new committee) (Do not add or subtract this line from the other lines)		
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	20/8.6	2018.6
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	645.64	645.64

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Green Party of Pina County	3. ID# 90 - C	094-CT
2. Report Covering Period From January 1 2007 Thru 31	May	2007
RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
Contributions other than loans and in-kind:		
(a) Individuals - more than \$25 (Total from Schedule A)	390	3%
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	836,29	836.29
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]		144(ord)
(e) Refund of Contributions (Total from Schedule F-2)		
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		7870 N. 292-W. 2024-V. 2024-V
(c) Total loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)	286.46	286.46
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	- 15/21/5	14619175
DISBURSEMENTS		
9. Expenditures for Operating Expenses (Total from Schedule D)	1732.14	1732.14
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)	286.46	286.46
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)	•	
15. Any other disbursement (Total from Schedule D-7)	·	
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	291810	70 Y 6
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. TOTAL disbursements [subtract line 17 from line 16]	$_{1/2}$ e $_{1}$ $_{5}$ $_{6}$	2018,6
19.Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)		
 I certify, under penalty of perjury, that I have examined the contents of this campaign finan knowledge and belief it is true and complete. 	ce report and to the b	est of my
Type or HithEvande of Fredsurer Cynthia Ferguson Duncan		
Signature of Treasurer or Candidate or Designating Individual:		Date 2 June 07

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1.	Committee Name Green Party of Pima Cou	nty	3. ID# 90-	094-CT
2.	Report Covering Period from 1 Tan 2001 tl	ru 31	May 20	07
4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	Lewis First MI Lewis Terrence	1-13-7	15-	
	STREET ADDRESS 239 & Palo Verde	3-15.7	30- 15-	60
	city Gilbert STATE AZ ZIP 85296	5-2.7	15-	
	occupation Engineer Employer Boeing			
b.	LAST Duncan FIRST Cynthia M			
	STREET ADDRESS 8058 & 7M ST	1-13-7	50 <u></u>	50
	CITY TUCSON STATE KZ ZIP 857(0			
	occupation EMPLOYER AZCOUNTANTS LE APENOSPACE FOUNDATION			
C.	LAST Kahl FIRST Robert MI			
	STREET ADDRESS 4700 N Kolb #2211			
	CITY TUCSON STATE AZ ZIP 85750	2-7-7	50-	50
	OCCUPATION EMPLOYER Jobino Investment Magt			
d.	LAST Ellquist FIRST Claudia MI	3-15.7	15	
	STREET ADDRESS 1240 N THICD AVE	4-3.7	160	115
	CITY, TUCSON STATE AZ ZIP 85765			
	occupation 5ef Employer			
e.	LAST Hunter Pavid MI	3-15	20	
	STREET ADDRESS 2817 E WAVERLY	3-15 5-2	20	40
	CITY tucson STATE 12 ZIP 85716			
	OCCUPATION info tech EMPLOYER Pinia County			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed			
	Summary Page line 4(a), Column A] *If contributions of \$25 or less are listed with contributor's harde, a @ress to the same listed with contributor's harder and the same listed with l	10 occupation and em	ployer on Schedule A.	
REV	do not include them on Schedule A-1. 3/00 6E: Nd 11 N		Schedule A Page	of 2
v	GO - I NO II N		Januario A Lago	

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CONTRIBUTIONS FROM INDIVIDUALS (More than \$25)*

1. (Committee Name Green Party of Pima C	outy	3. ID# %-	094-CT
		hru	May 2007	,
4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	LAST Hunter SALLE MI			
	STREET ADDRESS 133 & Grant	6-2-7	15	75
	STATE AZ ZIP 85705			
	occupation Self EMPLOYER			
b.	LAST FIRST MI			
	STREET ADDRESS			
	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
c.	LAST FIRST MI			
	STREET ADDRESS	7		
	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
d.	LAST FIRST MI			
	STREET ADDRESS	Ī.		
	CITY STATE ZIP			
	OCCUPATION EMPLOYER			
e.	LAST FIRST MI			
	STREET ADDRESS			
	CITY STATE ZIP			
	MAYDIAMA FERK			
5.		e occupation and	396. –	

do not include them on Schedule ATT 10 ATTO

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Schedule A Page 2 of 6

CONTRIBUTIONS of \$25 or Less - AGGREGATE TOTAL*

SCHEDULE A-1

1.	Committee Name Green	Party of Ping	County	3. ID# 90-094-CT	-
2.	Report Covering Period from_	1 Jan 2007	thru	31 May 2007	_

4. Aggregate Total of Contributions of \$25 or Less

Description	Amount Received This Period		Cumulative Total This Campaign To Date
Individuals 1655 Man \$25	47.45		47.45
Small contributions at meetings	155,50		155.5
Fondraisers	633.34	·	633.34
		<u></u>	CIT 10 IL 70
		ודא פר	TY OF T RECEN
		E R	PM I: 0
			ω ² ⁄
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4 (b), Column A]	836.29	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	836.29

^{*}If contributions of \$25 or less are listed with contributors name and address on Schedule A, do not include them on this schedule.

CONTRIBUTIONS of \$25 or Less - AGGREGATE TOTAL*

SCHEDULE A-1

1.	Committee Name			3. ID#	
2.	Report Covering Period from		thru		
4.	Aggregate Total of Contributions of \$25 of	r Less		•	
	Description	Amount Received This Period			Cumulative Total This Campaign To Date
-					
				•	
					OFF OF JU

6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE

Transfer total to Detailed Summary Page,

Line 4(b), Column B]

5. TOTAL THIS PERIOD

Transfer total to Detailed Summary Page, Line

^{*}If contributions of \$25 or less are listed with contributors name and address on Schedule A, do not include them on this schedule.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

Green Party of Pinia Country 2. ID# · 90-094-CT Committee Name thru 31 2007 3. Report Covering Period from: **EXPENDITURES** 4. DATE AMOUNT **EXPENDITURE** OF THE NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE MADE **EXPENDITURE** NAME, ADDRESS, CITY, STATE AND ZIP VOICE COM Phone 1-5-7 4-5-7 2-5-7 5900 Winwood Pkwy #500 Alphareten GA 3005 5-5.7 107.85 3-5-1 DESCRIPTION OF ITEMS OR SERVICES PURCHASED CHECK# debit auswering Lervice b. NAME, ADDRESS, CITY, STATE AND ZIP 1-7-7 2-6-7 DAVID 2 Stewart 1-47 3-6-7 139 E 9th ST Tucson AZ 85719
DESCRIPTION OF ITEMS OR SERVICES PURCHASED 1534 CHECK# 1033 1639 1031 1036 1040 Office Manager stopend NAME, ADDRESS, CITY, STATE AND ZIP 5-1-7 David & STEWARY 28.69 139 & 9th ST TUCSON AZ 85719
DESCRIPTION OF ITEMS OR SERVICES PURCHASED CHECK# 1041 Sopplies + advertising d. NAME, ADDRESS, CITY, STATE AND ZIP 1-16.7 DESCRIPTION OF ITEMS OR SERVICES PURCHASED CHECK# Box rent Jan -> Jun 07 1034 NAME, ADDRESS, CITX, STATE AND ZIP TICSON PEACE CENTER Po Box 42843 tucson AZ 85733
DESCRIPTION OF ITEMS OR SERVICES PURCHASED 2-le-7 30 annal Membership t table @ fair 1037 NAME, ADDRESS, CITY, STATE AND ZIP Compa55 Bank deb, t 11.60 DESCRIPTION OF ITEMS OR SERVICES PURCHASED CHECK# Bank fee 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D 1732.14 [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

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RECEIVED CITY OF TUCSON Schedule D Page ____ of ____

Committee Name		2. ID#			
F	Report Covering Period from:thruthru				
	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE		
L	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	IVIADE	LAILINDITORE		
	NAME, ADDRESS, CITY, STATE AND ZIP				
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	NAME, ADDRESS, CITY, STATE AND ZIP				
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	NAME, ADDRESS, CITY, STATE AND ZIP				
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	NAME, ADDRESS, CITY, STATE AND ZIP				
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
€.	NAME, ADDRESS, CITY, STATE AND ZIP		07 JUN		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#	L' BM		
f.	NAME, ADDRESS, CITY, STATE AND ZIP		HE 39		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]				

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Schedule D Page ___ of ___

IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

				Λ			
1.	Committee Name <u>Gveen</u> Report Covering Period from:	arty of Pin	ia Corri	7	2. ID# 96-09 May 2607	14-CT	
3.	Report Covering Period from:	Jan 2007	thru	31	May 2607		
4.	IN-KIND CONTRIBU	ITIONS AND EXPEND	ITURES				
	NAME AND ADDRESS OF IND ID# OF THE POLITICAL COMMITTEE) FI	•			DATE	FAIR MARKET VALUE	
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Claudia Ellguis F		CONTRIBUTION	M			
	1240 N Third AVE tucs			Ď	5-1-7	286,4	6
	DESCRIPTION Office Supplies	S & Postage					
	occupation Self	EMPLOYER .			•		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		CONTRIBUTION				
		•	EXPENDITURE				
	DESCRIPTION						
	OCCUPATION	EMPLOYER					
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		CONTRIBUTION				
			EXPENDITURE		9	7 JUN	YTIO
	DESCRIPTION				-	₹6 <u>-</u> 1	
	OCCUPATION	EMPLOYER			f (1	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		CONTRIBUTION			т : :	MOS
			EXPENDITURE				
	DESCRIPTION		1				
	OCCUPATION	EMPLOYER	•				
5.	ENTER TOTAL OF IN-KIND CONTRIBUTI			LEE		286.0	16
6.	ENTER TOTAL OF IN-KIND EXPENDITUR			EE		286.4	16
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IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

	Committee Name			2. ID#	
.	Report Covering Period fro	m:	thru		
ŀ.	IN-KIND CO	ONTRIBUTIONS AND EXPEN	IDITURES		FAIR
		SS OF INDIVIDUAL (OR NAME, ADD MITTEE) FROM WHOM RECEIVED (DATE	MARKET VALUE
a.	NAME, ADDRESS, CITY, STATE, ZIP	AND ID#	CONTRIBUTION EXPENDITURE		
	DESCRIPTION			1	,
	OCCUPATION	EMPLOYER			
b.	NAME, ADDRESS, CITY, STATE, ZI	P AND ID#	CONTRIBUTION	1	
			EXPENDITURE	1	
	DESCRIPTION				
	OCCUPATION	EMPLOYER			
С	NAME, ADDRESS, CITY, STATE, Z	P AND ID#	CONTRIBUTION	<u> </u>	
	DESCRIPTION			<u> </u>	CITY DI 70
	OCCUPATION	EMPLOYER			TY OF RECE
c	NAME, ADDRESS, CITY, STATE, 2	IP AND ID#	CONTRIBUTION EXPENDITURE		TUCSON VED PM 1: 39
	DESCRIPTION	-			(B)
	OCCUPATION	EMPLOYER			
5		CONTRIBUTIONS ONLY IF LAST fer total to Detailed Summary Page,		E	
6	. ENTER TOTAL OF IN-KIND E	EXPENDITURES ONLY IF LAST fer total to Detailed Summary Page,	PAGE OF SCHEDULE E		

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